

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	hth		04-09-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	5/6
FORMALITY REVIEW	TN	870	08 27 01
RESPONSE FORMALITY REVIEW	MD	JGMY	10/01/01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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MDP 579
RESP 850
11-01-01